## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further cindicated unless correcte maintenance fee notificat		for transmitting the ng the Patent, adva herwise in Block 1,	ISSUE FEE and PUB nce orders and notificati by (a) specifying a nev	LICATI on of n	ON FEE (if requinaintenance fees was pondence address;	ired). B vill be r and/or	locks   the nailed to to (b) indica	nrough 5 sh the current iting a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must					
32294	have	its own certificate	of mail	ing or tran	ismission.					
SQUIRE, SANDERS & DEMPSEY L.L.P. 14TH FLOOR 8000 TOWERS CRESCENT TYSONS CORNER, VA 22182					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
	211, 171 22102								(Depositor's name)	
									(Signature)	
					<del> </del>				(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED		ENTOR		ATTORNEY DOCKET NO.		KET NO.	CONFIRMATION NO.	
10/658,762	09/10/2003	<del></del>	Esa Malkama	ki		089229.00102			3933	
TITLE OF INVENTION:	METHOD AND DEVI	CE FOR CHANNE			LTIPLEXING				3733	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUI	PUBLICATION FEI	E DUE	PREV. PAID ISSUE	FEE	TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0 \$1700 12/05/2007 AUDNDAF2 00000381 1			12/11/2007 . <b>8658762</b>		
EXAMINER		ART UNIT	CLASS-SUBCLA	LASS-SUBCLASS		01			1440.00 OP	
MARCELO, MELVIN C		2616			02 FC:15	84			300.00 OP	
1. Change of corresponder CFR 1.363).  Change of correspon Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	(1) the names o or agents OR, al (2) the name of registered attom 2 registered pate	2. For printing on the patent front page issue  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME AN	ID RESIDENCE DATA	TO BE PRINTED	ON THE PATENT (prin	t or type	2)					
						e is ide	ntified bel	low, the doc	nument has been filed for	
(A) NAME OF ASSIG		(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
NOKIA CORPORA		KEILALAHDENTIE 4 FIN-02150 ESPOO, FINLAND								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🛄 Government										
4a. The following fee(s) ar  Issue Fee  Publication Fee (No Advance Order - # 6	4b. Payment of Fec(s)  A check is enclosed Payment by cre	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Check No. 17636  Payment by credit card. Form PTO-2038 is attached.								
· · · · · · · · · · · · · · · · · · ·	overpayment, to	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2222 (enclose an extra copy of this form).								
5. Change in Entity Statu  a. Applicant claims			b. Applicant is i	no longe	er claiming SMALI	FNTI	TV status	See 37 CED	1.27(a)(2)	
NOTE: The Issue Fee and interest as shown by the rec	Publication Fee (if requ	ired) will not be acc	ented from anyone other	than the	applicant; a regist	ered att	orney or a	gent; or the	assignee or other party in	
Authorized Signature	nark Office.	Conice.								
Typed or printed name Sejoon Ahn				Date December 4, 2007  Registration No. 58,959						
This collection of information application. Confidential ubmitting the completed a his form and/or suggestion 30x 1450, Alexandria, Virginia 22313 Under the Paperwork Redu	ion is required by 37 CF lity is governed by 35 I application form to the is for reducing this burg ginia 22313-1450. DO -1450.				ain a benefit by the nated to take 12 mi ual case. Any com U.S. Patent and Ti THIS ADDRESS.	public inutes to iments o rademar SEND 7	which is to complete on the amo k Office, I TO: Comm			